· · · · · · · · · · · · · · · · · · ·								Application or Docket Number					
	PATENT	APPLICATIO Effect	RD	10/786/740									
CLAIMS AS FILED - PART I (Calumn 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			29					RATE FEE		1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA .		84	BASIC FEE 385.00		OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			29 minus 20=		. 9			XS 9=		OB	X\$18=		
INDEPENDENT CLAIMS			7 minus 3 =		* 4		-	X43=		1	X86≃		
ML	ILTIPLE DEPEN	NDENT CLAIM P	L/		<u> </u>			7432		OR		544	
<u></u>	the difference	in column 1 is	loce than zero, enter "0" in column 2				نا ا	+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							` Т	OTAL.		OR	TOTAL	1276	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							S	MALL	ENTITY	ÓR	OTHER SMALL I		
٨		CLAIMS REMAINING	1	HIGH	EST	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI-	
AMENDMENT A	125/07	AFTER AMENDMENT	·	PREVIO	USLY	EXTRA	F					TIONAL FEE	
	Total	. 28	Minus	. 2	9	.0		(\$ 9=		OR	X\$18=		
	Independent	7	Minus	***	7	- O	 -,	X43=		OR	X86=	· ·	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL										200		
1,2,3,\$(19,22,26,27								145=		OR	+290=	\rightarrow	
	(Caluma 4)									OR,	ADDIT. FEE	-	
		(Column 1) CLAIMS	i	(Colun		(Column 3)						400:	
AMENOMENT B	•	REMAINING AFTER		NUMB PREVIO	FOR	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
		AMENDMENT		PAID					FEE			FEE ·	
	Total	· //	Minus	- 28	9	•	×	(\$ 9=		OR	X\$18=		
	Independent	•	Minus	***	7	<u> </u>	>	(43=		OR	X86=		
لـــا	TINST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM			145=		OR	+290=		
								TOTAL	:		YOYAL	<u>-</u> -	
	•	(Caluma 0)	ADD	NT. FEE		OH ,	ADDIT. FEE	7					
	1/1	(Column 1) CLAIMS		(Colun		(Column 3)						/_	
AMENDMENT C	1/2HM	REMAINING AFTER		NUME PREVIO		PRESENT EXTRA	l _R	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	1 MUI	AMENDMENT		PAID F		EAIM			FEE	L		FEE	
	Total .	·24	Minus	• 2	9	<i>□</i> ///	×	\$ 9=		OR	X\$18=		
	Independent		Minus	*** //	1	4//)	X	43=		. 1	X86=	_	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM	70	·⊢			OR	-/-		
• If the entry in column 1 is tess than the entry in column 2, write 10 in column 3.													
**	the 'Highest Nun	nber Previously Pal nber Previously Pa	d For IN THIS	S SPACE IS	less than	20, enter "20."		TOTAL IT. FEE	النسند	OR A	TOTAL ODIT. FEE		
Ť	he "Highest Num	ber Previously Paid	For (Total or	Independe	nt) is the	highest number	found in	n the app	ropriate box	in cot	ımn 1,	İ	